



**UNIVERSITY DENTAL GROUP**  
FAMILY PRACTICE

**Dear Patient,**

We would like to take this opportunity to welcome you to our office. We are committed to providing quality dental treatment in a caring, respectful, and educational environment.

Enclosed are three forms that we would like for you to complete and bring with you on the day of your appointment. These will become part of your office records and will be held in the strictest confidence.

If you would like our office to assist you in obtaining reimbursement from your insurance company, we will do everything possible to maximize your benefits. Please bring your completed insurance form and card to your first visit.

If for any reason you find it necessary to change this appointment, please notify our office as soon as possible so that we may arrange for another time.

**Should you have any questions, please call our office at your convenience. Our entire team looks forward to meeting you!**

**Sincerely,**

**Richard D. Morales, D.M.D**